

Vinada Limited

Current Status: 5 February 2014

The following summary has been accepted by the Ministry of Health as being an accurate reflection of the Certification Audit conducted against the Health and Disability Services Standards (NZS8134.1:2008; NZS8134.2:2008 and NZS8134.3:2008) on the audit date(s) specified.

General overview

Voguehaven rest home provides rest home care for up to 26 residents. On the day of audit, there were 22 residents. The facility is owned and managed by a husband and wife team (directors) for the last three years. The resident care manager (owner/director) has completed the national certificate in the support of the older person and has 15 years' experience working in aged care. The owner/director responsible for support services and maintenance is a qualified chef and has experience in the building trade. The third director is an experienced administrator with responsibilities for payroll. The family operated business provides individual care within a home environment. Management is supported by a part-time registered nurse (RN) who lives on site and available for residents and staff. Residents and families interviewed were complimentary about the care and service received.

There are improvements required around establishing corrective actions from surveys, accident/incident forms, human resources, hazard management, medications, care plans and interventions, food safety and electrical testing of equipment.

Audit Summary as at 5 February 2014

Standards have been assessed and summarised below:

Key

Indicator	Description	Definition
	Includes commendable elements above the required levels of performance	All standards applicable to this service fully attained with some standards exceeded
	No short falls	Standards applicable to this service fully attained

Indicator	Description	Definition
	Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity	Some standards applicable to this service partially attained and of low risk
	A number of shortfalls that require specific action to address	Some standards applicable to this service partially attained and of medium or high risk and/or unattained and of low risk
	Major shortfalls, significant action is needed to achieve the required levels of performance	Some standards applicable to this service unattained and of moderate or high risk

Consumer Rights as at 5 February 2014

Includes 13 standards that support an outcome where consumers receive safe services of an appropriate standard that comply with consumer rights legislation. Services are provided in a manner that is respectful of consumer rights, facilities, informed choice, minimises harm and acknowledges cultural and individual values and beliefs.		Standards applicable to this service fully attained.
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Organisational Management as at 5 February 2014

Includes 9 standards that support an outcome where consumers receive services that comply with legislation and are managed in a safe, efficient and effective manner.		Some standards applicable to this service partially attained and of medium or high risk and/or unattained and of low risk.
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Continuum of Service Delivery as at 5 February 2014

Includes 13 standards that support an outcome where consumers participate in and receive timely assessment, followed by services that are planned, coordinated, and delivered in a timely and appropriate manner, consistent with current legislation.		Some standards applicable to this service partially attained and of medium or high risk and/or unattained and of low risk.
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Safe and Appropriate Environment as at 5 February 2014

Includes 8 standards that support an outcome where services are provided in a clean, safe environment that is appropriate to the age/needs of the consumer, ensure physical privacy is maintained, has adequate space and amenities to facilitate independence, is in a setting appropriate to the consumer group and meets the needs of people with disabilities.		Some standards applicable to this service partially attained and of low risk.
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Restraint Minimisation and Safe Practice as at 5 February 2014

Includes 3 standards that support outcomes where consumers receive and experience services in the least restrictive and safe manner through restraint minimisation.		Standards applicable to this service fully attained.
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Infection Prevention and Control as at 5 February 2014

Includes 6 standards that support an outcome which minimises the risk of infection to consumers, service providers and visitors. Infection control policies and procedures are practical, safe and appropriate for the type of service provided and reflect current accepted good practice and legislative requirements. The organisation provides relevant education on infection control to all service providers and consumers. Surveillance for infection is carried out as specified in the infection control programme.		Standards applicable to this service fully attained.
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Audit Results as at 5 February 2014

Consumer Rights

Voguehaven practices in accordance with the Health and Disability Commissioner (HDC) Code of Health and Disability Services Consumers' Rights "the Code" and copies of the code are displayed in the main entrance.

There is information available about the Nationwide Health and Disability Advocacy Service. Staff, residents and family verified the service is respectful of individual needs including cultural and spiritual beliefs. Cultural training is provided and individual values and beliefs are considered on admission and continuing through the care planning process.

There are implemented policies at Voguehaven to protect residents from discrimination or harassment. Clinical policies are developed by an aged care consultant. Family/friends are able to visit at any time and interviews verified on-going involvement with community activity is supported. There is a complaints policy supporting practice and an up to date register.

Policies are implemented to support rights such as privacy, dignity, abuse/neglect, culture, values and beliefs, complaints, advocacy and informed consent. Annual staff

training supports staff understanding of residents' rights. Care plans accommodate the choices of residents.

Organisational Management

The organisation has a two-year business plan in place with quality objectives that are linked to the quality improvement system. The service has implemented policies and procedures developed by an aged care consultant. Quality, health and safety and infection control are set agenda items at the quality meetings and staff meetings. There are improvements required around establishing corrective actions from resident surveys, incident form documentation and hazard management.

Staff interviewed confirmed they are kept informed on risk management matters, outcomes of internal and external audits and receive meeting minutes. All newly employed staff have completed a recently reviewed comprehensive orientation programme. There are improvements required around job descriptions, references and annual appraisals.

There is a staffing policy that includes a documented rationale for determining staffing levels and skill mixes for safe service delivery. The staffing roster indicates there are adequate numbers of staff on duty to safely deliver care within a timely manner. The RN works part-time and available on call. There is an education planner in place that includes compulsory training for aged care staff.

Continuum of Service Delivery

The service has a policy for admission and entry for the rest home. A service information pack is made available prior to entry or on admission to the resident and family/whanau. Residents/relatives confirmed the admission process and the admission agreement is discussed with them. The registered nurse is responsible for each stage of service provision. Assessments and care plans are developed and implemented within the required timeframes to ensure there is safe, timely and appropriate delivery of care. The GP completes three monthly reviews.

The residents' needs, objectives/goals have been identified in the long-term care plans and these are reviewed at least six monthly or earlier if there is a change to health status. There is an improvement required around behaviour management documentation, pain assessments and documenting resident/relative involvement in care plans.

The activity programme is resident focused and provides a variety of activities to meet the interests and abilities of the consumer group. Community links are maintained. Improvements are required around activity plans.

Education and medicines competencies are completed by all staff responsible for administration of medicines. The medicines records reviewed include photo

identification and documentation of allergies and sensitivities. There are improvements required around medicine management.

All meals and baking is prepared and cooked on site. Resident's individual food preferences, dislikes and dietary requirements are met. There is an improvement required around the food service.

Safe and Appropriate Environment

Voguehaven rest home is a well maintained home with on-going interior refurbishment. The environment is homely and comfortable. There are large grounds and gardens with shaded seating. The building has a current building warrant of fitness and fire service evacuation approval. All rooms are single, personalised and have a hand basin. There is adequate room for residents to move freely about their bedrooms and communal areas using mobility aids. The communal dining and lounge areas encourage social interaction within the rest home. Outdoor areas are safe and accessible for the rest home residents. There is adequate equipment for the safe delivery of care. There is an improvement required to checks of electrical equipment, scales and hoist. All chemicals are stored safely throughout the facility. The cleaning service maintains a tidy, clean environment. There are emergency policies and procedures in place to guide staff should an emergency or civil defence event occur. Staff receive training in emergency procedures.

Restraint Minimisation and Safe Practice

There are comprehensive policies and procedures that meet the restraint standards. The registered nurse is the restraints co-ordinator and provides a report to the quality committee meeting three monthly. There are no residents with restraints and two residents with enablers. Restraint and challenging behaviour training has been provided.

Infection Prevention and Control

The infection control programme and its content and detail, is appropriate for the size, complexity, and degree of risk associated with the service. The registered nurse is the infection control co-ordinator. The Infection Control co-ordinator is part of the quality committee group. Reports and surveillance data are discussed at staff meetings. All staff receive infection control education on orientation and attend annual education. Improvements are required around the definition of responsibilities for the infection control co-ordinator.